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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

1017.P073US

First Inventor

Michael I. Jones

Title

System and Method for the

Express Mail Label No.

ER 314 306 859 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 38]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 15]
5. Oath or Declaration [Total Sheets 2]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ Paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: .....

Prior application information:

Examiner: .....

Art Unit: .....

For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS



Customer Number:

OR ☐

Correspondence address below

Name

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Robert A. McLaughlan

Registration No. (Attorney/Agent)

44,924

Signature

Date

April 2, 2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

# FEE TRANSMITTAL FOR FY 2004

Patent Fees are subject to annual revision.

Applicant claims small entity status.  
See 37 CFR 1.27

Application Number Unknown

Filing Date Herewith

First Named Inventor Michael I. Jones

Examiner Name Unknown

Group / Art Unit Unknown

Total Amount of Payment \$ 1,076.00

Attorney Docket No. 1017.P073US

## METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account No.: 50-2240

Deposit Account Name: Koestner Bertani, LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge any fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below (except for the filing date) to the above identified deposit account.

## FEE CALCULATION

### 1. Basic Filing Fee

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility Filing Fee	\$ 770.00
1002	340	2002	170	Design Filing Fee	\$
1003	530	2003	265	Plant Filing Fee	\$
1004	770	2004	385	Reissue Filing Fee	\$
1005	160	2005	80	Provisional Filing Fee	\$
				<b>Subtotal (1)</b>	<b>\$ 770.00</b>

### 2. Extra Claim Fees

Claims	Extra	Fee (below)	Fee Paid
Total	30 - 20 = 10 x	\$ 18.00	= \$ 180.00
Indep.	4 - 3 = 1 x	\$ 86.00	= \$ 86.00
Multiple Dependent			\$ 266.00

Large Entity		Small Entity		Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
				Subtotal (2)	\$ 266.00

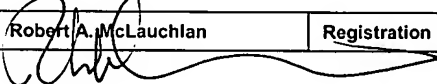
\*\*or number previously paid, if greater. For Reissues, see below

## FEE CALCULATION (continued)

### 3. Additional Fees

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late fee or oath	\$
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	Request for Reexamination	\$
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	\$
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	\$
1251	110	2251	55	Extension for reply within first month	\$
1252	420	2252	210	Extension for reply within second month	\$
1253	950	2253	475	Extension for reply within third month	\$
1254	1,480	2254	740	Extension for reply within fourth month	\$
1255	2,010	2255	1,005	Extension for reply within fifth month	\$
1401	330	2401	165	Notice of Appeal	\$
1402	330	2402	165	Filing a brief in support of an appeal	\$
1403	290	2403	145	Request for oral hearing	\$
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	\$
1453	1,330	2453	665	Petition to revive - unintentional	\$
1501	1,330	2501	665	Utility issue fee (or reissue)	\$
1502	480	2502	240	Design issue fee	\$
1460	130	1460	130	Petitions to the Commissioner unless otherwise specified	\$
1807	50	1807	50	Statutory Disclaimer	\$
1806	180	1806	180	Submission of Information Disclosure Statement	\$
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	\$ 40.00
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	\$
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	\$
1801	770	2801	385	Request for Continued Examination (RCE)	\$
1802	900	1802	900	Request for expedited examination of a design application	\$
Other fee (specify):					\$
* Reduced by Basic Filing Fee Paid				<b>Subtotal (3)</b>	<b>\$ 40.00</b>

## SUBMITTED BY

Name (Print/Type)	Registration No.	Telephone	Complete (if applicable)
Robert A. McLaughlan	44,924	(512) 339-4100	
Signature	Date		
	April 2, 2004		